

**LUBINER, SCHMIDT & PALUMBO, L.L.C.**

ATTORNEYS AND COUNSELORS AT LAW

123 NORTH UNION AVENUE, SUITE 305

CRANFORD, NJ 07016

PHONE: (908) 709-0500

FAX: (908) 709-9447

MichelleDWelsh@comcast.net

Office: 908-709-0500

Cell: 908-499-3748

November 5, 2018

Andrew J. Casais; Borough Clerk  
Roselle Park  
110 East Westfield Avenue  
Roselle Park, New Jersey 07204

Dear Andrew J. Casais:

Kindly accept this correspondence and the enclosed resume in support of my candidacy for the municipal court public defender position for Roselle Park. As my resume indicates, I have more than twenty-four (24) years' experience practicing criminal law in municipal courts, and have devoted my entire professional career to criminal and municipal court matters.

I am currently the public defender of Long Hill Township as well as the alternate public defender for Roselle and Linden. I also am an associate with the law firm of Lubiner, Schmidt and Palumbo where my practice relates exclusively to criminal law. I appreciate the demands of a busy municipal court and have demonstrated this many times while working as the alternate public defender for Linden. I have shown that I understand the importance of moving the docket and controlling costs as well as respecting the rights of defendants. I understand that the compensation for the position of Public Defender is fixed and will gladly accept the remunerated amount for this position.

If you need to discuss my candidacy further, I would welcome this opportunity. Should you feel that my qualifications and expertise might meet Linden's current needs, please feel free to contact me at your convenience.

Very truly yours,

  
Michelle D. Welsh

## BOROUGH OF ROSELLE PARK

### SUBMISSION CHECKLIST

THE FOLLOWING ITEMS, AS INDICATED BELOW <input checked="" type="checkbox"/> , SHALL BE PROVIDED WITH THE RECEIPT OF SEALED SUBMISSIONS		Initial Here
<input checked="" type="checkbox"/>	Completed RFP Checklist	MDW
<input checked="" type="checkbox"/>	Completed Submission Form / Qualification Statement	MDW
<input checked="" type="checkbox"/>	Statement of Ownership Disclosure	MDW
<input checked="" type="checkbox"/>	Non-Collusion Affidavit	MDW
<input checked="" type="checkbox"/>	Required EEO/Affirmative Action Evidence & Signed Compliance Notice	MDW
<input checked="" type="checkbox"/>	Acknowledgement of Americans with Disabilities Act Language of 1990	MDW
<input checked="" type="checkbox"/>	Disclosure of Investment Activities in Iran	MDW
<input checked="" type="checkbox"/>	Insurance Requirement Acknowledgement Form	MDW
<input checked="" type="checkbox"/>	Certification Regarding Political Contributions	MDW
<input checked="" type="checkbox"/>	New Jersey Business Registration Certificate of Vendor	MDW
<input checked="" type="checkbox"/>	W-9 of Vendor	MDW

This checklist is provided for vendor's use in assuring compliance with required documentation; however, it does not include all submission requirements and does not relieve the vendor of the need to read and comply with the RFP.

Name of Vendor: Michelle D. Welsh Date: 11-5-18

Signature: X. Michelle D. Welsh

Print Name: Michelle D. Welsh

Title: Attorney

BOROUGH OF ROSELLE PARK

**SUBMISSION FORM / QUALIFICATION STATEMENT**

(ATTACH ADDITIONAL SHEETS AS NECESSARY,  
BUT DO NOT SIMPLY ATTACH VENDOR MATERIALS  
AND TYPE/WRITE: "SEE ATTACHED")

1. Names and roles of the individuals who will perform the services and description of their education and experience with projects similar to the services contained herein:

please see attached letter

**SUBMISSION FORM / QUALIFICATION STATEMENT**  
**(CONTINUED)**

(ATTACH ADDITIONAL SHEETS AS NECESSARY,  
BUT DO NOT SIMPLY ATTACH VENDOR MATERIALS  
AND TYPE/WRITE: "SEE ATTACHED")

3. Description of ability to provide the services in a timely fashion (including staffing, familiarity and location of key staff):

please see attached

**SUBMISSION FORM / QUALIFICATION STATEMENT**  
**(CONTINUED)**

(ATTACH ADDITIONAL SHEETS AS NECESSARY,  
BUT DO NOT SIMPLY ATTACH VENDOR MATERIALS  
AND TYPE/WRITE: "SEE ATTACHED")

4. Cost details, including the annual fee for primary duties and the hourly rates of each of the individuals who will perform services, and all expenses for any work that is not included in the primary duties:

please see attached

**CERTIFICATION OF PROPOSAL**

(Sign Below)

Firm: Lubiner, Schmidt & Palumbo

Date: 11-5-18

Authorized Representative (Print): Michelle D. Welsh

Signature: Michelle D. Welsh

Title: Attorney

Telephone No.: 908-499-3748

Fax No.: 908-709-9447

**Michelle D. Welsh**

114 High Street

Cranford, New Jersey 07016

(908) 499-3748

**New Jersey Bar Certified**

**United States Court of Appeals for the Third District**

**United States District Court for the District of New Jersey**

**Experience**

**Lubiner, Schmidt & Palumbo, L.L.C.**

January 2012-present

Responsible for all aspects of defense of criminal law clients

**Alternate Public Defender for City of Linden**

January 2018-present

**Appointment to District XII of the Fee Arbitration Committee**

September 2018-present

**Palumbo and Renaud**

Per diem; October 2012-present

**Township of Cranford Alternate Public Defender**

December 2006-present

**Township of Long Hill Public Defender**

December 1998-present

**Township of Roselle Alternate Public Defender**

January 2018-present

**Bob Smith and Associates; Piscataway, New Jersey: Of Counsel**

December 2000-September 2018

Responsible for representation and defense of all criminal law clients. Practice before municipal courts in dozens of New Jersey jurisdictions.

**Appellate Public Defender's Office; Newark, New Jersey**

February 1997-December 2000

Review of underlying criminal trial records, analysis of same, preparation of Appellate briefs on behalf of indigent incarcerated defendants.

**Burbage and Ramsey; Trenton, New Jersey**

January 1994-June 1997

Responsibilities included but were not limited to preparation and argument of criminal matters on behalf of defendants and various municipalities; such practice included evaluation of discovery, preparation of evidentiary and dispositive motions with supporting briefs, plea negotiations, sentencing and Appellate matters. In addition, I was the acting public defender in Trenton Municipal Court and Lambertville Municipal Court.

**District Attorney's Office; Los Angeles, California**

Certified Law Clerk; August 1992-December 1992

**Middlesex County Prosecutor's Office; New Brunswick, New Jersey**

Legal Internship; June 1992-August 1992

#### **Education**

**Whittier College School of Law; Los Angeles, California**

**Juris Doctor Degree; May 1993**

**Cum Laude; Class Rank: 16/140**

**Seton Hall University School of Law; Newark, New Jersey**

Summer Session, 1992

## **LETTER OF QUALIFICATION**

Attn: Andrew J. Casais; Borough Clerk  
Roselle Park Municipal Court  
110 East Westfield Avenue  
Roselle Park, New Jersey 07204

Dear Andrew J. Casais:

Neither the undersigned nor any individuals that are connected with this firm have been disbarred, suspended, or otherwise are prohibited from professional practice by any federal, state, or local agency.

In addition, the undersigned will comply with the General Terms and Conditions required by the Borough of Roselle Park and enter into the Borough's standard Professional Services Contract.

I affirm that the contents of my Qualifications Statement are accurate, factual and complete to the best of my knowledge and belief and that the Qualifications Statement is submitted in good faith upon express understanding that any false statement may result in the disqualification of Michelle D. Welsh, and the firm of Lubiner, Schmidt and Palumbo.

Michelle D. Welsh

November 5, 2018

## BOROUGH OF ROSELLE PARK

### STATEMENT OF OWNERSHIP DISCLOSURE N.J.S.A. 52:25-24.2 (P.L. 1977, c.33, as amended by P.L. 2016, c.43)

THIS STATEMENT SHALL BE COMPLETED, CERTIFIED TO, AND INCLUDED WITH ALL BID AND PROPOSAL SUBMISSIONS. FAILURE TO SUBMIT THE REQUIRED INFORMATION IS CAUSE FOR AUTOMATIC REJECTION OF THE BID OR PROPOSAL.

Name of Organization: Lubiner, Schmidt & Palumbo

Organization Address: 123 N. Union Ave Suite 305  
Cranford, NJ 07016

#### Part I

Check the box that represents the type of business organization:

- Sole Proprietorship (skip Parts II and III, execute certification in Part IV)
- Non-Profit Corporation (skip Parts II and III, execute certification in Part IV)
- For-Profit Corporation (any type)
- Limited Liability Company (LLC)
- Partnership
- Limited Partnership
- Limited Liability Partnership (LLP)
- Other (be specific): \_\_\_\_\_

#### Part II

- The list below contains the names and addresses of all stockholders in the corporation who own 10 percent or more of its stock, of any class, or of all individual partners in the partnership who own a 10 percent or greater interest therein, or of all members in the limited liability company who own a 10 percent or greater interest therein, as the case may be. (**COMPLETE THE LIST ON THE NEXT PAGE IN THIS SECTION**)

OR

- No one stockholder in the corporation owns 10 percent or more of its stock, of any class, or no individual partner in the partnership owns a 10 percent or greater interest therein, or no member in the limited liability company owns a 10 percent or greater interest therein, as the case may be. (**SKIP TO PART IV**)

**STATEMENT OF OWNERSHIP DISCLOSURE**  
**(Continued)**

(Please attach additional sheets if more space is needed):

Name of Individual or Business Entity	Home Address (for Individuals) or Business Address

**Part III**

**DISCLOSURE OF 10% OR GREATER OWNERSHIP IN THE STOCKHOLDERS, PARTNERS OR LLC MEMBERS LISTED IN PART II**

If a bidder has a direct or indirect parent entity which is publicly traded, and any person holds a 10 percent or greater beneficial interest in the publicly traded parent entity as of the last annual federal Security and Exchange Commission (SEC) or foreign equivalent filing, ownership disclosure can be met by providing links to the website(s) containing the last annual filing(s) with the federal Securities and Exchange Commission (or foreign equivalent) that contain the name and address of each person holding a 10% or greater beneficial interest in the publicly traded parent entity, along with the relevant page numbers of the filing(s) that contain the information on each such person. Attach additional sheets if more space is needed.

Website (URL) containing the last annual SEC (or foreign equivalent) filing	Page #'s

Please list the names and addresses of each stockholder, partner or member owning a 10 percent or greater interest in any corresponding corporation, partnership and/or limited liability company (LLC) listed in Part II other than for any publicly traded parent entities referenced above. The disclosure shall be continued until names and addresses of every noncorporate stockholder, and individual partner, and member exceeding the 10 percent ownership criteria established pursuant to N.J.S.A. 52:25-24.2 has been listed. Attach additional sheets if more space is needed.

Stockholder/Partner/Member and Corresponding Entity Listed in Part II	Home Address (for Individuals) or Business Address

**STATEMENT OF OWNERSHIP DISCLOSURE**  
**(Continued)**

**Part IV**  
**Certification**

I, being duly sworn upon my oath, hereby represent that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I acknowledge: that I am authorized to execute this certification on behalf of the bidder/proposer; that the Borough of Roselle Park is relying on the information contained herein and that I am under a continuing obligation from the date of this certification through the completion of any contracts with the Borough of Roselle Park to notify the Borough of Roselle Park in writing of any changes to the information contained herein; that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I am subject to criminal prosecution under the law and that it will constitute a material breach of my agreement(s) with the, permitting the Borough of Roselle Park to declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print):	Michelle D. Welsh	Title:	Attorney
Signature:	Michelle D. Welsh	Date:	11-5-18

BOROUGH OF ROSELLE PARK

NON-COLLUSION AFFIDAVIT

State of New Jersey  
County of Union

ss:

I, Michelle D. Welsh of the City of Cranford in  
the County of Union and State of New Jersey full age, being duly  
sworn according to law on my oath depose and say that:

I am Michelle D. Welsh of the firm of Lubiner, Schmidt & Palumbo  
(Title or Position) (Name of Firm)

the bidder making this Proposal for the above named project, and that I executed the said proposal with full authority so to do; that said bidder has not, directly or indirectly entered into any agreement, participated in any collusion, or otherwise taken any action in restraint of free, competitive bidding in connection with the above named project; and that all statements contained in said proposal and in this affidavit are true and correct, and made with full knowledge that the Borough of Roselle Park relies upon the truth of the statements contained in said proposal and in the statements contained in this affidavit in awarding the contract for the said project.

I further warrant that no person or selling agency has been employed or retained to solicit or secure such contract upon an agreement or understanding for a commission, percentage, brokerage, or contingent fee, except bona fide employees or bona fide employees or bona fide established commercial or selling agencies maintained by Michelle D. Welsh (name of contractor).

Subscribed and sworn to

before me this 5<sup>th</sup> day  
of November, 2018.

x. Michelle D. Welsh  
Signature

Michelle D. Welsh  
(Type or print name of affiant under signature)

Notary public of

PATRICIA SKROBOT WERNES

A Notary Public of New Jersey

My Commission Expires November 8, 2018

My Commission expires \_\_\_\_\_

## BOROUGH OF ROSELLE PARK

### **AFFIRMATIVE ACTION COMPLIANCE NOTICE** **N.J.S.A. 10:5-31 and N.J.A.C. 17:27**

#### **GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS**

This form is a summary of the successful bidder's requirement to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27-1 et seq.

The successful bidder shall submit to the public agency, after notification of award but prior to execution of this contract, one of the following three documents as forms of evidence:

- a) A photocopy of a valid letter that the contractor is operating under an existing Federally approved or sanctioned affirmative action program (good for one year from the date of the letter);  
OR
- b) A photocopy of a Certificate of Employee Information Report approval, issued in accordance with N.J.A.C. 17:27-4;  
OR
- c) A photocopy of an Employee Information Report (Form AA302) provided by the Division and distributed to the public agency to be completed by the contractor in accordance with N.J.A.C. 17:27-4.

The successful vendor may obtain the Affirmative Action Employee Information Report (AA302) from the contracting unit during normal business hours.

The successful vendor(s) must submit the copies of the AA302 Report to the Division of Contract Compliance and Equal Employment Opportunity in Public Contracts (Division). The Public Agency copy is submitted to the public agency, and the vendor copy is retained by the vendor.

The undersigned vendor certifies that he/she is aware of the commitment to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27.1 et seq. and agrees to furnish the required forms of evidence.

The undersigned vendor further understands that his/her bid shall be rejected as non-responsive if said contractor fails to comply with the requirements of N.J.S.A. 10:5-31 and N.J.A.C. 17:27-1 et seq.

COMPANY: Lubiner, Schmidt & Palumbo

SIGNATURE: Michelle D. Welsh

PRINT NAME: Michelle D. Welsh

TITLE: Attorney

DATE: November, 5, 2018

## BOROUGH OF ROSELLE PARK

### **EXHIBIT A**

### **MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE**

N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)

N.J.A.C. 17:27

### **GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS**

During the performance of this contract, the contractor agrees as follows:

The contractor or subcontractor, where applicable, will not discriminate against any employee or applicant for employment because of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Except with respect to affectional or sexual orientation and gender identity or expression, the contractor will ensure that equal employment opportunity is afforded to such applicants in recruitment and employment, and that employees are treated during employment, without regard to their age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex. Such equal employment opportunity shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. The contractor agrees to post in conspicuous places, available to employees and applicants for employment, notices to be provided by the Public Agency Compliance Officer setting forth provisions of this nondiscrimination clause.

The contractor or subcontractor, where applicable will, in all solicitations or advertisements for employees placed by or on behalf of the contractor, state that all qualified applicants will receive consideration for employment without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex.

The contractor or subcontractor will send to each labor union, with which it has a collective bargaining agreement, a notice, to be provided by the agency contracting officer, advising the labor union of the contractor's commitments under this chapter and shall post copies of the notice in conspicuous places available to employees and applicants for employment.

The contractor or subcontractor, where applicable, agrees to comply with any regulations promulgated by the Treasurer pursuant to N.J.S.A. 10:5-31 et seq., as amended and supplemented from time to time and the Americans with Disabilities Act.

The contractor or subcontractor agrees to make good faith efforts to meet targeted Borough employment goals established in accordance with N.J.A.C. 17:27-5.2.

The contractor or subcontractor agrees to inform in writing its appropriate recruitment agencies including, but not limited to, employment agencies, placement bureaus, colleges, universities, and labor unions, that it does not discriminate on the basis of age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, and that it will discontinue the use of any recruitment agency which engages in direct or indirect discriminatory practices.

The contractor or subcontractor agrees to revise any of its testing procedures, if necessary, to assure that all personnel testing conforms with the principles of job-related testing, as established by the statutes and court decisions of the State of New Jersey and as established by applicable Federal law and applicable Federal court decisions.

In conforming with the targeted employment goals, the contractor or subcontractor agrees to review all procedures relating to transfer, upgrading, downgrading and layoff to ensure that all such actions are taken

**EXHIBIT A**  
**MANDATORY EQUAL EMPLOYMENT OPPORTUNITY LANGUAGE**  
N.J.S.A. 10:5-31 et seq. (P.L. 1975, C. 127)  
N.J.A.C. 17:27  
**GOODS, PROFESSIONAL SERVICE AND GENERAL SERVICE CONTRACTS**  
**(Continued)**

without regard to age, race, creed, color, national origin, ancestry, marital status, affectional or sexual orientation, gender identity or expression, disability, nationality or sex, consistent with the statutes and court decisions of the State of New Jersey, and applicable Federal law and applicable Federal court decisions.

The contractor shall submit to the public agency, after notification of award but prior to execution of a goods and services contract, one of the following three documents:

Letter of Federal Affirmative Action Plan Approval

Certificate of Employee Information Report

Employee Information Report Form AA302 (electronically provided by the Division and distributed to the public agency through the Division's website at [www.state.nj.us/treasury/contract\\_compliance](http://www.state.nj.us/treasury/contract_compliance)).

The contractor and its subcontractors shall furnish such reports or other documents to the Division of Purchase & Property, CCAU, EEO Monitoring Program as may be requested by the office from time to time in order to carry out the purposes of these regulations, and public agencies shall furnish such information as may be requested by the Division of Purchase & Property, CCAU, EEO Monitoring Program for conducting a compliance investigation pursuant to **Subchapter 10 of the Administrative Code** at N.J.A.C. 17:27.

## BOROUGH OF ROSELLE PARK

### **AMERICANS WITH DISABILITIES ACT OF 1990** Equal Opportunity for Individuals with Disability

The Contractor and the Owner, do hereby agree that the provisions of Title 11 of the Americans with Disabilities Act of 1990 (the "Act") (*42 U.S.C. S12101 et seq.*), which prohibits discrimination on the basis of disability by public entities in all services, programs, and activities provided or made available by public entities, and the rules and regulations promulgated pursuant thereto, are made a part of this contract. In providing any aid, benefit, or service on behalf of the owner pursuant to this contract, the contractor agrees that the performance shall be in strict compliance with the Act. In the event that the contractor, its agents, servants, employees, or subcontractors violate or are alleged to have violated the Act during the performance of this contract, the contractor shall defend the owner in any action or administrative proceeding commenced pursuant to this Act. The contractor shall indemnify, protect, and save harmless the owner, its agents, servants, and employees from and against any and all suits, claims, losses, demands, or damages, of whatever kind or nature arising out of or claimed to arise out of the alleged violation. The contractor shall, at its own expense, appear, defend, and pay any and all charges for legal services and any and all costs and other expenses arising from such action or administrative proceeding or incurred in connection therewith. In any and all complaints brought pursuant to the owner's grievance procedure, the contractor agrees to abide by any decision of the owner which is rendered pursuant to said grievance procedure. If any action or administrative proceeding results in an award of damages against the owner, or if the owner incurs any expense to cure a violation of the ADA which has been brought pursuant to its grievance procedure, the contractor shall satisfy and discharge the same at its own expense.

The owner shall, as soon as practicable after a claim has been made against it, give written notice thereof to the contractor along with full and complete particulars of the claim. If any action or administrative proceeding is brought against the owner or any of its agents, servants, and employees, the *owner shall* expeditiously forward or have forwarded to the contractor every demand, complaint, notice, summons, pleading, or other process received by the owner or its representatives.

It is expressly agreed and understood that any approval by the owner of the services provided by the contractor pursuant to this contract will not relieve the contractor of the obligation to comply with the Act and to defend, indemnify, protect, and save harmless the owner pursuant to this paragraph.

It is further agreed and understood that the owner assumes no obligation to indemnify or save harmless the contractor, its agents, servants, employees and subcontractors for any claim which may arise out of their performance of this Agreement. Furthermore, the contractor expressly understands and agrees that the provisions of this indemnification clause shall in no way limit the contractor's obligations assumed in this Agreement, nor shall they be construed to relieve the contractor from any liability, nor preclude the owner from taking any other actions available to it under any other provisions of the Agreement or otherwise at law.

The undersigned vendor consents to the full understanding of the forgoing Americans with Disabilities Act Language of 1990:

Bidder/Vendor: Michelle D. Welsh

Signature: Michelle D. Welsh

Full Name (Print): Michelle D. Welsh

Title: ATTORNEY

Date November 5, 2018

## BOROUGH OF ROSELLE PARK

### **DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**

#### **PART 1: CERTIFICATION BIDDERS MUST COMPLETE PART 1 BY CHECKING EITHER BOX.**

Pursuant to Public Law 2012, c. 25, any person or entity that submits a bid or proposal or otherwise proposes to enter into or renew a contract must complete the certification below to attest, under penalty of perjury, that neither the person or entity, nor any of its parents, subsidiaries, or affiliates, is identified on the Department of Treasury's Chapter 25 list as a person or entity engaging in investment activities in Iran. The Chapter 25 list is found on the Division's website at <http://www.state.nj.us/treasury/purchase/pdf/Chapter25List.pdf>. Bidders must review this list prior to completing the below certification. Failure to complete the certification will render a bidder's proposal non-responsive.

#### **PLEASE CHECK EITHER BOX:**

I certify, pursuant to Public Law 2012, c. 25, that neither the person/entity listed above nor any of the entity's parents, subsidiaries, or affiliates is listed on the N.J. Department of the Treasury's list of entities determined to be engaged in prohibited activities in Iran pursuant to P.L. 2012, c. 25 ("Chapter 25 List"). I further certify that I am the person listed above, or I am an officer or representative of the entity listed above and am authorized to make this certification on its behalf. I will skip Part 2 and sign and complete the Certification below.

OR

I am unable to certify as above because I or the bidding entity and/or one or more of its parents, subsidiaries, or affiliates is listed on the Department's Chapter 25 list. I will provide a detailed, accurate and precise description of the activities in Part 2 below and sign and complete the Certification below. Failure to provide such will result in the proposal being rendered as non-responsive and appropriate penalties, fines and/or sanctions will be assessed as provided by law.

#### **PART 2**

#### **PROVIDE FURTHER INFORMATION RELATED TO INVESTMENT ACTIVITIES IN IRAN**

You must provide a detailed, accurate and precise description of the activities of the bidding person/entity, or one of its parents, subsidiaries or affiliates, engaging in the investment activities in Iran outlined above by completing the form below. (PROVIDE INFORMATION RELATIVE TO THE ABOVE QUESTIONS. PLEASE PROVIDE THOROUGH ANSWERS TO EACH QUESTION. IF YOU NEED TO MAKE ADDITIONAL ENTRIES, USE ADDITIONAL PAGES).

Name: \_\_\_\_\_

Relationship to Bidder/Vendor: \_\_\_\_\_

Description of Activities: \_\_\_\_\_

Duration of Engagement: \_\_\_\_\_ Anticipated Cessation Date: \_\_\_\_\_

Bidder/Vendor: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Contact Phone Number: \_\_\_\_\_

**DISCLOSURE OF INVESTMENT ACTIVITIES IN IRAN**  
**(Continued)**

**CERTIFICATION**

I, being duly sworn upon my oath, hereby represent and state that the foregoing information and any attachments thereto to the best of my knowledge are true and complete. I attest that I am authorized to execute this certification on behalf of the below-referenced person or entity. I acknowledge that the Borough of Roselle Park is relying on the information contained herein and thereby acknowledge that I am under a continuing obligation from the date of this certification through the completion of contracts with the Borough of Roselle Park to notify the Borough of Roselle Park in writing of any changes to the answers or information contained herein. I acknowledge that I am aware that it is a criminal offense to make a false statement or misrepresentation in this certification, and if I do so, I recognize that I am subject to criminal prosecution under the law and that it will also constitute a material breach of my agreements(s) with the Borough of Roselle Park and that the Borough of Roselle Park at its option may declare any contract(s) resulting from this certification void and unenforceable.

Full Name (Print): Michelle D. Welsh

Signature: Michelle D. Welsh

Title: Attorney

Date 11-5-18

Bidder/Vendor: Michelle D. Welsh

## BOROUGH OF ROSELLE PARK

### INSURANCE REQUIREMENTS AND ACKNOWLEDGEMENT FORM

Certificate(s) of Insurance shall be filed with the Borough Clerk's Office upon award of contract by the governing body

The minimum amount of insurance to be carried by the Professional Service Entity shall be as follows:

#### **PROFESSIONAL LIABILITY INSURANCE**

Limits shall be a minimum of \$1,000,000.00 for each claim and \$1,000,000.00 aggregate each policy period.

Acknowledgement of Insurance Requirement:

SIGNATURE: Michelle D. Welsh DATE: 11-5-18  
Michelle D. Welsh, attorney  
(Printed Name & Title)

## **BOROUGH OF ROSELLE PARK**

## CERTIFICATION REGARDING POLITICAL CONTRIBUTIONS

STATE OF NEW JERSEY : SS.

I, Michelle D. Welsh of the Law Firm of  
Lubiner, Schmidt & Palumbo in the County of Union and the State of New Jersey, of —  
full age, being duly sworn

according to law on my oath depose and say that:

I am the Attorney Lubiner, Schmidt + Palumbo of the firm of Lubiner, Schmidt + Palumbo, the Professional Service Entity making the submissions for the above named Service, and that I executed the said submission with full authority to do so; that said Professional Service Entity acknowledges that it is aware that the Borough of Roselle Park pursuant to Section 2-4 of the Borough Code prohibits the awarding of any public contract to any Professional Service Entity that has contributed in excess of two hundred (\$200.00) dollars to a campaign committee of any Borough of Roselle Park candidate or holder of the public office having ultimate responsibility for the award of the contract, or to any Borough of Roselle Park or Union County Party Committee, or to any political action committee (PAC) that is organized for the primary purpose of promoting or supporting Borough of Roselle Park municipal candidates or municipal officeholders, within one (1) calendar year immediately preceding the date of the contract or agreement.

I further warrant that pursuant to Roselle Park Borough Section 2-4, a “professional service provider” seeking a public contract means: an individual, including the individual’s spouse, if any, and any child living at home; person; firm; corporation; professional corporation; partnership; organization; or association. The definition of a service provider includes all principals who own one (1%) percent or more of the equity in the corporation or business trust, partners, and officers in the aggregate employed by the provider as well as any subsidiaries directly controlled by the service provider.

I further warrant that I have reviewed Borough Code Section 2-4.

I hereby certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment for contempt of Court.

Subscribed and sworn to before me  
this 5th day of November, 2014

(Signature of Notary)

(Affix Seal)

PATRICIA SKROBOT WERNES  
A Notary Public of New Jersey  
My Commission Expires November 8, 2018

Michelle D. Wells  
(Signature of Professional) Attorney  
Name:  
Title:



# STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

Taxpayer Name: LUBINER SCHMIDT & PALUMBO LLC

Trade Name:

Address: 123 NORTH UNION AVE  
CRANFORD, NJ 07016

Certificate Number: 1995642

Effective Date: November 20, 2015

Date of Issuance: October 07, 2017

For Office Use Only:

20171007094920141

NEW JERSEY DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES

CERTIFICATE OF FORMATION

LUBINER, SCHMIDT & PALUMBO LLC  
0450023032

The above-named DOMESTIC LIMITED LIABILITY COMPANY was duly filed in accordance with New Jersey State Law on 10/09/2015 and was assigned identification number 0450023032. Following are the articles that constitute its original certificate.

1. Name:  
LUBINER, SCHMIDT & PALUMBO LLC
2. Registered Agent:  
ALAN LUBINER
3. Registered Office:  
123 NORTH UNION AVE  
SUITE 305  
CRANFORD, NEW JERSEY 07016
4. Business Purpose:  
LEGAL SERVICES
5. Effective Date of this Filing is:  
11/01/2015
6. Members/Managers:  
ALAN M. LUBINER  
123 NORTH UNION AVE  
SUITE 305  
CRANFORD, NEW JERSEY 07016

DAVID W. SCHMIDT  
123 NORTH UNION AVE  
SUITE 305  
CRANFORD, NEW JERSEY 07016

TODD D. PALUMBO  
123 NORTH UNION AVE  
SUITE 305  
CRANFORD, NEW JERSEY 07016

7. Main Business Address:  
123 NORTH UNION AVE  
SUITE 305  
CRANFORD, NEW JERSEY 07016

Signatures:  
ALAN M. LUBINER  
AUTHORIZED REPRESENTATIVE

Continued on next page ...

Page 1 of 2

NEW JERSEY DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES

CERTIFICATE OF FORMATION

LUBINER, SCHMIDT & PALUMBO LLC  
0450023032

*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and  
affixed my Official Seal  
9th day of October, 2015*

*Robert A. Romano*

*Robert A. Romano  
Acting State Treasurer*



*Certificate Number : 4004606114  
Verify this certificate online at  
[https://www1.state.nj.us/TYTR\\_StandingCertJSP/Verify\\_CERT.jsp](https://www1.state.nj.us/TYTR_StandingCertJSP/Verify_CERT.jsp)*

**IRS** DEPARTMENT OF THE TREASURY  
INTERNAL REVENUE SERVICE  
CINCINNATI OH 45999-0023

Date of this notice: 10-09-2015

Employer Identification Number:  
47-5282601

Form: SS-4

Number of this notice: CP 575 A

LUBINER SCHMIDT & PALUMBO LLC  
ALAN M LUBINER MBR  
123 N UNION AVE  
CRANFORD, NJ 07016

For assistance you may call us at:  
1-800-829-4933

IF YOU WRITE, ATTACH THE  
STUB AT THE END OF THIS NOTICE.

WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 47-5282601. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 941	01/31/2016
Form 940	01/31/2016
Form 1065	04/15/2016

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, *Accounting Periods and Methods*.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.B. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, *Entity Classification Election*. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832, *Entity Classification Election*, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, *Election by a Small Business Corporation*. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

If you are required to deposit for employment taxes (Forms 941, 943, 940, 944, 945, CT-1, or 1042), excise taxes (Form 720), or income taxes (Form 1120), you will receive a Welcome Package shortly, which includes instructions for making your deposits electronically through the Electronic Federal Tax Payment System (EFTPS). A Personal Identification Number (PIN) for EFTPS will also be sent to you under separate cover. Please activate the PIN once you receive it, even if you have requested the services of a tax professional or representative. For more information about EFTPS, refer to Publication 966, *Electronic Choices to Pay All Your Federal Taxes*. If you need to make a deposit immediately, you will need to make arrangements with your Financial Institution to complete a wire transfer.

The IRS is committed to helping all taxpayers comply with their tax filing obligations. If you need help completing your returns or meeting your tax obligations, Authorized e-file Providers, such as Reporting Agents (payroll service providers) are available to assist you. Visit the IRS Web site at [www.irs.gov](http://www.irs.gov) for a list of companies that offer IRS e-file for business products and services. The list provides addresses, telephone numbers, and links to their Web sites.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at [www.irs.gov](http://www.irs.gov). If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.

**IMPORTANT REMINDERS:**

- \* Keep a copy of this notice in your permanent records. This notice is issued only one time and the IRS will not be able to generate a duplicate copy for you. You may give a copy of this document to anyone asking for proof of your EIN.
- \* Use this EIN and your name exactly as they appear at the top of this notice on all your federal tax forms.
- \* Refer to this EIN on your tax-related correspondence and documents.

If you have questions about your EIN, you can call us at the phone number or write to us at the address shown at the top of this notice. If you write, please tear off the stub at the bottom of this notice and send it along with your letter. If you do not need to write us, do not complete and return the stub.

Your name control associated with this EIN is LUBI. You will need to provide this information, along with your EIN, if you file your returns electronically.

Thank you for your cooperation.

Keep this part for your records.

CP 575 A (Rev. 7-2007)

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Return this part with any correspondence  
so we may identify your account. Please  
correct any errors in your name or address.

CP 575 A

9999999999

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 10-09-2015  
(      ) - \_\_\_\_\_ EMPLOYER IDENTIFICATION NUMBER: 47-5282601  
\_\_\_\_\_  
FORM: SS-4 NOBOD

INTERNAL REVENUE SERVICE  
CINCINNATI OH 45999-0023  
[REDACTED]

LUBINER SCHMIDT & PALUMBO LLC  
ALAN M LUBINER MBR  
123 N UNION AVE  
CRANFORD, NJ 07016



# **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)  
10/08/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERNS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER	First Indemnity Insurance Agency 87 Oxford Street Lynn, MA 01901	CONTACT NAME:	James Caeran		
		PHONE (AG, HN, EM):	781-581-2500	FAX (AG, HN, EM):	781-595-2293
		E-MAIL ADDRESS:	jcaeran@firstindemnity.net		
		INSURERS AFFORDING COVERAGE			NAIC #
INSURED	American Alternative Insurance				
	INSURER B:				
	INSURER C:				
	INSURER D:				
	INSURER E:				
	INSURER F:				

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**COVERAGES**

**CERTIFICATE NUMBER:**

**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

EXCLUSIONS AND CONDITIONS OF POLICY. CERTAIN LIMITS OF COVERAGE MAY HAVE BEEN REDUCED BY THIS SECTION.													
INSR LTR	TYPE OF INSURANCE		ADD'L INSRD	SUBR WVD	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMITS					
	GENERAL LIABILITY							EACH OCCURANCE					
	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY											DAMAGE TO RENTED PREMISES (Each occurrence)	
	<input checked="" type="checkbox"/>	<input type="checkbox"/> CLAIMS MADE						<input type="checkbox"/> OCCUR					MED EXP (Any one person)
												PERSONAL & AND INJURY	
												GENERAL AGGREGATE	
												PRODUCTS - COMP/OP AGG	
	GENL AGGREGATE LIMIT APPLIES PER:												
	<input checked="" type="checkbox"/> POLICY							<input type="checkbox"/> PROJECT	<input type="checkbox"/> LOC				
AUTOMOBILE LIABILITY													
	ANY AUTO							COMBINED SINGLE LIMIT (Each accident)					
	<input type="checkbox"/> ALL OWNED AUTOS							<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per person)
	<input type="checkbox"/> HIRED AUTOS							<input type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per accident)
												PROPERTY DAMAGE (Per accident)	
	UMBRELLA LIAB							<input type="checkbox"/> OCCUR					EACH OCCURANCE
	EXCESS LIAB							<input type="checkbox"/> CLAIMS MADE					AGGREGATE
	<input type="checkbox"/> DED							<input type="checkbox"/> RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							Y/N <input type="checkbox"/>	N/A				WC STATUTORY LIMITS
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED?						OTHER							
(Mandatory in NH)						E.L. EACH ACCIDENT							
If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASES - EA EMPLOYEE							
						E.L. DISEASE - POLICY LIMIT							
A	Lawyers Professional			5LA2PL00001 70-03	01/28/18	01/28/19	Each Claim: \$ 1,000,000 General Aggregate: \$ 2,000,000						

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (Attach ACCORD 101, Additional Remarks Schedule, if more space is required)

Claims made Coverage, Covering 8 Attorneys, Retroactive Date: 06/01/1996. Deductible is \$25,000.00  
Per Claim and applies to Loss only. Claims Expenses Are In Addition To the Limits of Liability.

**CERTIFICATE HOLDER**

**CANCELLATION**

Union County Bar Association 2 Broad Street #3 Elizabeth, NJ 07201	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSUREER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND TO THE INSURER, IT'S AGENTS OR REPRESENTATIVES
AUTHORIZED REPRESENTATIVE 	



# STATE OF NEW JERSEY BUSINESS REGISTRATION CERTIFICATE

**Taxpayer Name:** LUBINER SCHMIDT & PALUMBO LLC

**Trade Name:**

**Address:** 123 NORTH UNION AVE  
CRANFORD, NJ 07016

**Certificate Number:** 1995642

**Effective Date:** November 20, 2015

**Date of Issuance:** October 07, 2017

**For Office Use Only:**

20171007094920141